

AMUSEMENTS.

BLACK'S OPERA HOUSE

Tuesday Evening, Dec. 14, '86

Engagement of the celebrated American

Author and Actor.

JOHN A. STEVENS

Supported by an American Company of

exceptional excellence under the management

of Frank J. Haney, in the

powerful dramatic spectacle.

A GREAT

Wrong Righted

The greatest "wonder" drama of the

stage, a story of a mother's love for

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DYSPEPSIA

A dangerous and distressing complaint

which is often the result of indigestion

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IMPLANTING TEETH.

DESCRIPTION OF A REMARKABLE

OPERATION IN DENTAL SURGERY.

A Doctor who has Great Fame in His

Methods of Implantation—Some of the

Mistakes which Experimenters Have

Made.

A few months ago we gave a report of

what Dr. William J. Younger, San Fran-

cisco, Cal., had been doing in the way of

implanting teeth into artificial sockets.

At that time he considered it essential to

preserve the vitality of the permanent

membrane by keeping the tooth in water

of a temperature of about 120° F., or to

implant the tooth, just after extraction, in

the comb of a cock.

Since then he has discovered that the

pericemental membrane will retain its

vitality for 13 months, and how much

longer has not been determined, without

any care, being carried in the pocket, left

on the dressing case, etc.

The report of this case, one of several,

is given in a pamphlet of 14 pages, entitled

"Implantation of Teeth and Pericemental

Life," being a report made to the California

State Dental Association, July 21,

1886. The doctor has great faith in the

operation, has succeeded beyond his "con-

servative expectations," and believes

"that in a short while it will become an

firmly established professional practice

in any other operation requiring skill and

judgment."

THE DOCTOR'S PRACTICE.

The doctor's practice is to lay the ex-

tracted teeth aside in a clean, cool, dry

place, for future use. He never keeps teeth

with graded trephans, finishing the walls

with bars of various shapes.

Previous to inserting the tooth in the

socket he soaks it for half an hour in

water containing bi-chloride of mercury in

a thousand, temperature 110° to

120° F., during the operation of forming

the socket he washes the tooth with cold

water, containing the same percentage of

bi-chloride of mercury, trying the tooth

from time to time, always returning

the tooth to its bath. He forces

the tooth finally to place in the socket

by means of a special instrument, such as

a pivot tooth into position, using no

ligatures to retain the tooth unless abso-

lutely necessary. In answering the ob-

jections to this operation by those who

have met with failures in replantation

and transplantation, he says:

"Now, if they would but consider the

conditions and circumstances under which

these different operations are undertaken,

they would readily see that the premises

under which the ground truth is presented

are unassailable and successful. For instance,

in replantation, as this operation is usually

performed, the parts that are the pericemental

membrane of the tooth are largely de-

stroyed, and the alveolar process immediately

surrounding the tooth, are highly inflamed,

in a state of disease, with pus either already

formed or forming at the end of the root,

and the operation is undertaken with the

view of relieving or aborting an alveolar

abscess. A portion of the diseased apex

is then cut off, and the tooth is forced

into the cavity. Here we have a diseased

root thrust back into a diseased

socket. The disease not removed, its con-

ditions are simply modified, and while

the congestion may subside the tooth be-

comes comparatively comfortable, the

disintegration of the root substance—al-

ready begun—is likely to continue, and

in the course of time the diseased root be-

comes destroyed, or what is called ab-

sorption; and the crown drops off. So

much for replantation.

ANOTHER MISTAKE.

Again, in transplantation, there is a

healthy tooth, but it is usually made to

take the place of a diseased, old, dis-

eased root that has been growing and fe-

stering in a diseased socket, for years,

to the detriment of the patient's health.

The diseased root is usually left in the

socket, and the new tooth is inserted in

the surrounding alveolus, extracted with it.

On the contrary, enough is usually left of

the diseased root to cause the new tooth

to be pulled out, but it is the disease in the

surrounding alveolus, extracted with it.

On the contrary, enough is usually left of

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On the contrary, enough is usually left of

UTTERLY DISCOURAGED

expresses the feeling of many victims of

rheumatism, neuralgia, sciatica, and

other such ailments. Having tried

dozens of so-called remedies, and physi-

cians of all schools, without relief, there